#### DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 07/28/2006

## **Provider Inspection Summary**

For the period 06/01/2003 to 05/31/2006 Community Based Residential Facility CLASS CNA (NONAMBULATORY) STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

#### **Facility Information**

**Facility Name: CURLER HOME (110301)** 

Address: 238 E MADISON AVE, MILTON, WI 53563

**License Status: REGULAR** 

Licensed/Certified/Registered 06/06/1991

Regional Office: SOUTHERN REGION (MADISON), (608) 243-2370

Survey History						
Survey ID: 0095466	End Date: 09/02/2005	Type: STANDARD	Purpose: COMPLAINT			
Results: NO STATEMENT OF DEFICIENCY ISSUED						
Survey ID: 0092129	End Date: 03/02/2004	Type: STANDARD	Purpose: SURVEY			
Results: ENFORCEMENT ACTION						
Statement of Deficiency: #10007952 Served 03/17/2004						
				Compliance		
	<u>Deficiencies Cited</u>	Subject Area		<u>Verified</u>	Corrected	
	83.33(3)(a)1	PRACTITIONER'S WRITTEN ORDER FOR MEDS		09/02/2005	Yes	
	83.33(3)(b)2.d	MEDICATION STORAGE SHALL BE LOCKED		09/02/2005	Yes	
	83.41(4)(f)	NO COMBUSTIBLE MATERIALS		09/02/2005	Yes	

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

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### **Enforcement History**

Date: 03/12/2004 SOD #10007952 Appealed: No

**Sanctions** 

FORFEITURE---83.33(3)(b)2.d FORFEITURE---83.41(4)(f)

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**Complaint History** 

Date Complaint Received: 06/28/2005 Date Investigation Completed: 09/06/2005

Subject Area(s) Result SOD #

NUTRITION & FOOD SERVICESNOT SUBSTANTIATEDMEDICATIONSNOT SUBSTANTIATEDSTAFF TRAINING AND PROFICIENCYNOT SUBSTANTIATED

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